





October '02 CARES Update...

CARES (Capital Asset Realignment for Enhanced Services) is a **nationwide** initiative to identify veterans' medical needs over the next 20 years. CARES is expected to give the VA a better understanding of where veterans live, what their needs are, and how best to meet those needs.

Since June '02, New York and New Jersey VA Medical Center employees have been communicating with internal and external stakeholders about the CARES process. Comments about CARES may be entered electronically on the VISN3 web page at www.va.gov/visns/visn03 or shared with the following VISN3 CARES communication coordinators.

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What's Happening in Network 3?

VISN 3 staff, along with the national VISN Support Service Center (VSSC), has visited several Medical Center's and conducted extensive reviews of space and utilization and made a general assessment of the condition of the space. Additionally, the planning demographics, veteran population data, and projections being used by the National CARES Program Office (NCPO) have been validated to establish baselines for the CARES planning process.

Working with the NCPO, population projections and historic utilization patterns within a county, and in some instances a zip code, were reviewed. The outcome was the identification of markets and sub-markets at the county level; the classification of counties as urban or rural; the identification of counties where there may be overlapping markets; and the development of preliminary estimates of enrollees requiring primary, acute inpatient, or tertiary services. Distance and patient travel time factors will be measured from patients' homes to the sites of care (i.e. primary care, inpatient care, etc.).

Each Network 3 medical center also completed a detailed inventory of clinical services provided at or through their facilities. The inventory is expected to help identify gaps in service delivery.

At the end of September, Russell Lloyd, CARES VSSC liaison for Network 3, and Mark Hall, also from the VSSC, conducted site visits at New York and New Jersey VA medical centers. During their visits, they presented updates on CARES, provided training to the Network 3 CARES team, and discussed the software being developed to assist in developing CARES planning initiatives.

At this point, CARES has involved internal validation of facility infrastructure, space utilization, patient utilization patterns, availability of current clinical services and training. In mid November, the VISN3 CARES Committee will join committees from across the nation in Baltimore to develop CARES planning initiatives that will be shared later in the month.